

Shattered hearts: AIDS orphans in Zambia

by [Richard Matteson](#) in the [September 9, 2008](#) issue

"We did not know that a child can mourn and grieve. We thought they were too small to understand what had happened."

"We did not know that children go grieving for a long period. . . . I never used to understand the behavior of orphans."

"We never knew that anything could be done to help the orphans apart from giving them food and clothes and school fees."

The AIDS epidemic in Zambia is expected to leave 1 million orphans in its wake—almost 10 percent of the country's population. If one adds to this figure the number of children who have lost one parent to AIDS, the total number of grieving children in the country is staggering.

Like most nations in southern Africa, Zambia (formerly Northern Rhodesia) is mired in poverty. The average family survives—barely—on \$300 per year. Most Zambians are undernourished. The HIV infection rate is still high—16 percent, down from a high of 26 percent thanks to massive education efforts undertaken by the government and an array of nongovernmental organizations, including churches.

Zambia's orphans must rely on the good will of their extended family or the charity of well-meaning people in their villages. Forty-six percent of Zambian families are caring for orphans. That means that people who are already barely surviving must add another mouth to feed. It's a heroic act for families to take in these children. Families often have to decide between feeding the orphans and paying the fees for their schooling. As hard as life is for these orphans, they are better off than the many who live in the streets and steal food to survive.

The torturous grief with which these children suffer is far less obvious than their physical needs and even harder to address. Few adults in any society understand that children grieve or recognize the manifestations or consequences of such grief,

and this is especially true in a country like Zambia. Grief can lead to sleeplessness, nightmares, excessive crying, regressive behavior, verbal and physical fighting, anger, mood swings, chronic fatigue, loneliness, stomach aches, headaches, an inability to concentrate, withdrawal from social contact, depression, suicidal thoughts and more.

Grief has long-term consequences, some of which can be extremely serious. Children who experience parental loss are derailed developmentally. Getting them back on track is a major undertaking that requires the help of dedicated adults who understand what the children are going through and who have the dedication and persistence to support them for as long as it takes.

Caring for grieving children can be confusing, frustrating, alienating, exasperating. Are the children being naughty, sinful, immature, unappreciative, rebellious? Unless the people who care for these children understand them, they are very likely to get discouraged, impose inappropriate discipline, give up and send them away—or find an excuse to abuse them.

When one ten-year-old girl began to wet the bed shortly after her parents died, it was very confusing to her caregiver, especially when the child explained that she had never wet the bed before coming to live with the caregiver. But bedwetting is a common problem among children who experience parental loss. Knowing that this problem occurs frequently was important to this caregiver. Otherwise she probably would have concluded that she was the wrong person to care for this child and that the child should be placed with someone else—which would have been very bad for the child.

After Arnold's father died he was filled with rage. He got into many fistfights, and he refused to cooperate with adults, including an uncle he had been very close to. His anger was upsetting to the caregivers, especially since they were often the targets of the anger—which seemed to them particularly unjust. It takes understanding, patience and expressions of love to help a child get beyond such anger.

Martha, 14, confided to her pastor that she was trying to learn how to commit suicide. Both of her parents died when she was seven. She longed to be united with them, and she believed that she could achieve this by dying. Her pastor couldn't understand why, after the passage of years, the child would still miss her parents to such a degree. Most caregivers wonder why, after many years, a child would still feel

the impact of her parents' death. They might wonder if they have failed somehow and consider finding another home for the child. But parental loss involves such a deep shattering of a child's heart and mind that the experience of the loss can recur. Life's circumstances can conspire to make the loss feel very immediate.

In view of the challenges of grief that the Zambian caregivers faced, I agreed to teach a four-day seminar on children and grief at Pemba College in southern Zambia. Most of the pastors who serve Wesleyan churches in this province receive their training at this small college. I designed the seminar to help these pastors-to-be understand grief and to provide them with skills for working with grieving children and their caregivers.

At first I worried about whether my message might get lost because of cultural differences. I also wondered if the students would be receptive to the insights of Western psychology. But their immediate response made it clear that my comments were meeting a need. "Now we know why orphans are so different from other children," they said.

At the end of the second day, the college dean asked me to remain on campus an extra day to summarize for 30 pastors what I had been teaching. I gladly agreed to, and their response was the same as that of the students. One pastor asked me to spend the next year teaching throughout Zambia.

In response to this request, I created an organization called Hope for Grieving Children to serve Zambia's many orphans. Since 2004 I've traveled to Zambia five times to lead seminars for pastors from Wesleyan, Anglican, Lutheran and several other Christian traditions. In 2007 I started a certification seminar for pastors and laypersons so they could become qualified to teach seminars to others. I've been helped in all this by a Zambian colleague, Lameck Siamalambo. Eventually the Zambians will do it all.

"Guardians now understand that it's grief that causes those strange behaviors in the orphans. Guardians have learned to be patient," commented Rolita Machila, a Lutheran pastor.

The emotional plight of AIDS orphans is a hidden catastrophe that needs to be addressed throughout Africa. A society that neglects its grieving children will eventually pay yet another price for the AIDS pandemic.